


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P04000083579**  
 1. Entity Name  
**AM PEST CONTROL OF MANATEE, INC.**



Principal Place of Business 11610 3RD AVE. EAST BRADENTON, FL 34212-1655	Mailing Address 11610 3RD AVE. EAST BRADENTON, FL 34212-1655
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05102006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-1201996	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 SCHOFIELD, P. ALLEN  
 1429 60TH AVE. WEST, STE. 300  
 BRADENTON, FL 34207

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 6, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DURKIN, JOHN F 409 PINE AVE. ANNA MARIA, FL 34216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEWIS, JAMES M 614 - 36TH ST. WEST BRADENTON, FL 34205
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 05/20/06-80086-010 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John F Durkin* Date: 5/17/06 Daytime Phone #: (813) 728-1630  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR